

DEC 14 2005

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FACSIMILE COVER SHEET**TO:** Examiner Ly T. Tran
U. S. Patent & Trademark Office
Group Art Unit 2853**FROM:** Michael K. O'Neill (Reg. No. 32,622)**RE:** U.S. Application No. 09/661,388
Atty. Docket No.: 03690.000066.**FAX NO.:** (571) 273-8300**DATE:** December 14, 2005**NO. OF PAGES:** 13
(including cover page)**TIME:** 4:37 PM**SENT BY:** Dawn M.**MESSAGE****Attachments:**

- 1) Transmittal,
- 2) Amendment

Certificate of TransmissionI hereby certify that this correspondence is being facsimile
transmitted to the Patent and Trademark Office on:December 14, 2005
DateMichael K. O'Neill
SignatureMichael K. O'Neill (Reg. No. 32,622)
Name of person signing certificate**Note:** We are transmitting from a Canon Model FAX-L770
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DEC 14 2005

In re Application of:

Docket No. 03690.000066.

KENTARO ONUMA, et al.

Application No.: 09/661,388

Examiner: Ly T. Tran

Filed: September 13, 2000

Group Art Unit: 2853

For: IMPROVED PRINT HEAD RECOVERY

Date: December 14, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 44	MINUS	** 164	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 2	MINUS	*** 12	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Michael K. O'Neill
Attorney for Applicants
Registration No.: 32,622

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Form #120

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03690.000066.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: Ly T. Tran
KENTARO ONUMA, et al.)
: Group Art Unit: 2853
Application No.: 09/661,388)
: Filed: September 13, 2000)
: For: IMPROVED PRINT HEAD)
RECOVERY : December 14, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated October 14, 2005, please amend the
above-identified application as follows.

I hereby certify that this correspondence is being transmitted via facsimile
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450, (571) 273-8300, on

December 14, 2005
(Date of Deposit)

Michael K. O'Neill (Reg. No. 32,622)
(Name of Attorney for Applicant)

Signature

December 14, 2005
(Date of Signature)